07/16/2020 12:07

FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Committee to Elect Jared Golden PO Box 7108 ADDRESS (number and street) (Check if address is changed) Lewiston 04240 ME CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mbrengarth@mbacg.com (Check if address is changed) Optional Second E-Mail Address Idecot@mbacg.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://jaredgoldenforcongress.com/ (Check if address is changed) DATE 2020 C00653816 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Carpenter, Michael, , , Type or Print Name of Treasurer Carpenter, Michael, , , [Electronically Filed] 07 16 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Fo	orm 1 (Revised 02/2009)	Page 2
TYPE OF C	COMMITTEE	
Candidate	e Committee:	
(a) x	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
Name of Candidate	Golden, Jared, , ,	
Candidate	Office DEM Sought: X House Senate President	State
Party Affiliati	ion DEM Sought: X House Senate President	District 02
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Con		
(d)		Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	ected organization is a:
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	regated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revised (Page 3
	Elect Jared Golden	
		Loodondin BAO Coore
	Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
Maintaining a Majority		
Mailing Address	918 Pennsylvania Ave SE	
	Washington DC	20003
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee X Joint Fundraising Represent	Leadership PAC Sponsor
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number optional) and position of the p	person in possession of committee
Decot, Lau Full Name	uren, Lee, ,	
	PO Box 7108	
Mailing Address		
	Lewiston	04240
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	Telephone number	
3. Treasurer : List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee assistant treasurer).	e; and the name and address of
I	, Michael, , ,	ı
of Treasurer	IPO Box 7108	
Mailing Address		
	Lewiston	04240
Title or Position , Treasurer	CITY STATE	ZIP CODE
	Telephone number	

FEC Forr	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Lee, Lauren, Decot, ,	
Mailing Address	PO Box 7108	
	Lewiston ME 04240 CITY STATE	ZIP CODE
Title or Position Assistant Treas	urer Telephone number	
 Banks or Other safety deposit be Name of Bank, 	Depositories: List all banks or other depositories in which the committee deposits funds, hold oxes or maintains funds. Depository, etc. Amalgamated Bank	s accounts, rents
	1825 K Street NW	
Mailing Address		
	Washington DC 20006	
	CITY STATE	ZIP CODE
Name of Bank,	Depository, etc.	
Mailing Address	Maine Family Federal Credit Union 555 Sabattus Street	
	Lewiston ME 04240	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
6.	Name of Any Connected Hold the House Fi	Organization, Affiliated Committee, Joint Fundra	uising Representative	e, or Leadership PAC Sponsor
	Mailing Address	119 1st Ave S		
		Ste 320		
		Seattle	WA	98104
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joint I	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	_ CITY ▲	STATE ▲	ZIP CODE ▲
	THEE ON FOSITION			
			ephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the	ephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi		FEC ID number	С
		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		PEC ID Hullibel	<u> </u>
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Jared Golden Vid	etory Fund 2020		
1			
Mailing Address	PO Box 5258		
			1 1 1 1 1 1 1 1 1
	Augusta	ME	04332
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

n). Joint Fundraisi r									
1.					FEC ID	number	С		
2					FEC ID	number	C		
3.					FEC ID	number	С		
4.					FEC ID	number	С		
ame of Any Connected		ffiliated Comm	ittee, Joint	Fundrais	sing Repre	esentativ	e, or Lea	adership P	AC Spor
Go For Broke for	veterans								
Mailing Address	PO Box 1532	0							
Mailing Address									
	Washington					ı DC ı	. 20	003	
Relationship:	-	CITY]- <u> </u>
neialionship.		CITY.	A		•	STATE A		ZIP C	ODE 🛦
Connected	d Organization	Affiliated Con	nmittee		ındraising l	Represent	ative	Leadersh	nip PAC S
Connected		Affiliated Con	nmittee		Indraising I	Represent	ative	Leadersh	
Connecter connec		Affiliated Con	nmittee		indraising I	Represent	ative	Leadersh	
Connected Agent: Identify Full Name		Affiliated Con	nmittee		Indraising I	Represent	ative	Leadersh	
Connected Agent: Identify Full Name	y by name, addre	Affiliated Con	nmittee x	nal)		Represent		Leadersh	nip PAC S
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Connected Agent: Identify Full Name	y by name, addre	Affiliated Coness (phone num	nmittee x	nal)		TATE A			nip PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

(g) c	or(h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
		Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	House Victory Pro	ject 2020 		
	Mailing Address	918 Pennsylvania Ave SE		
		Washington	DC DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponso
	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
		by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name	CITY A		
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	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	CITY CITY Te	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank,	CITY CITY Te	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	CITY CITY Te	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	CITY CITY Te	STATE ▲	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** _____11___

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
North East Victor	y Fund		
	1 910 17th St NW Ste 925		
Mailing Address	310 1741 31144 312 323		
	Washington	DC DC	20006
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	Affiliated Committee Joint Jo	int Fundraising Represent	Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
Hold the House \	/ictory Fund		
	430 S Capitol St SE		
Mailing Address			
	FI 2		
	Washington	DC DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	Leadership PAC S
	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
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esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Representation	
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	ا Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
New Congress F	una 		
Mailing Address	910 17th St NW		
Mailing Address	Ste 925		
	Washington	, DC	20006
Dalatianakia			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Jofy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC S
		int Fundraising Represent	ative Leadership PAC S
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